

09/01/99

Jc644 U.S. PTO

Please type a plus sign (+) inside this box [+]

PTO/SB/05 (12/97)

Approved for use through 09/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 81862.P157Total Pages 5First Named Inventor or Application Identifier Pete N. MooreExpress Mail Label No. EL371011509US

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, D. C. 20231

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. x Fee Transmittal Form
(Submit an original, and a duplicate for fee processing)
2. x Specification (Total Pages 17)
(preferred arrangement set forth below)
 - Descriptive Title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to Microfiche Appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claims
 - Abstract of the Disclosure
3. x Drawings(s) (35 USC 113) (Total Sheets 9)
4. x Oath or Declaration (Total Pages 6)
 - a. x Newly Executed (Original or Copy)
 - b. Copy from a Prior Application (37 CFR 1.63(d))
(for Continuation/Divisional with Box 17 completed) (**Note Box 5 below**)
 - i. DELETIONS OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
5. Incorporation By Reference (useable if Box 4b is checked)
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.
6. Microfiche Computer Program (Appendix)

12/01/97

- 1 -

PTO/SB/05 (12/97)

Jc525 U.S. PTO

09/388804

09/01/99

- (if applicable, all necessary)

a. _____ Computer Readable Copy
b. _____ Paper Copy (identical to computer copy)
c. _____ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

- | | | |
|-----|---------------|--------------------------------------------------------------------------|
| 8. | <u> x </u> | Assignment Papers (cover sheet & documents(s)) |
| 9. | <u> </u> | a. 37 CFR 3.73(b) Statement (where there is an assignee) |
| | <u> x </u> | b. Power of Attorney |
| 10. | <u> </u> | English Translation Document (if applicable) |
| 11. | <u> </u> | a. Information Disclosure Statement (IDS)/PTO-1449 |
| | <u> </u> | b. Copies of IDS Citations |
| 12. | <u> </u> | Preliminary Amendment |
| 13. | <u> x </u> | Return Receipt Postcard (MPEP 503) (Should be specifically itemized) |
| 14. | <u> </u> | a. Small Entity Statement(s) |
| | <u> </u> | b. Statement filed in prior application, Status still proper and desired |
| 15. | <u> </u> | Certified Copy of Priority Document(s) (if foreign priority is claimed) |
| 16. | <u> x </u> | Other: <u>Copy of Postcard w/Express Mail Stamp</u> |

17. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information:
☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)
of prior application No:

- 18.
- Correspondence Address**

____ Customer Number or Bar Code Label
(Insert Customer No. or Attach Bar Code Label here)

X Correspondence Address Below

NAME Tarek N. Fahmi – Reg. No.: 41,402
BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

ADDRESS 12400 Wilshire Boulevard
Seventh Floor

CITY Los Angeles STATE California ZIP CODE 90025-1026

Country U.S.A. TELEPHONE (408) 720-8598 FAX (408) 720-9397

FEE TRANSMITTAL FOR FY 1999**TOTAL AMOUNT OF PAYMENT (\$)** \$1,010.00**Complete if Known:****Application No.** Not Yet Assigned**Filing Date** Herewith**First Named Inventor** Pete N. Moore**Group Art Unit** Not Yet Assigned**Examiner Name** Not Yet Assigned**Attorney Docket No.** 81862.P157**METHOD OF PAYMENT (check one)**

1. ☒ **The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:**

Deposit Account Number 02-2666**Deposit Account Name** _____

- ☒ **Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17**

2. ☒ **Payment Enclosed:**
☒ **Check**
☐ **Money Order**
☐ **Other**

FEE CALCULATION**1. BASIC FILING FEE**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>	<u>Fee Paid</u>
<u>Fee Code</u>	<u>Fee (\$)</u>	<u>Fee Code</u>	<u>Fee (\$)</u>		
101	760	201	380	Utility application filing fee	<u>\$760</u>
106	310	206	155	Design application filing fee	_____
107	480	207	240	Plant filing fee	_____
108	760	208	380	Reissue filing fee	_____
114	150	214	75	Provisional application filing fee	_____
SUBTOTAL (1)					\$ 760.00

2. EXTRA CLAIM FEES

			<u>Extra Claims</u>	<u>Fee from below</u>	<u>Fee Paid</u>
Total Claims	<u>23</u>	- 20** =	<u>3</u>	X <u>\$18</u>	= <u>\$ 54</u>
Independent Claims	<u>5</u>	- 3** =	<u>2</u>	X <u>\$78</u>	= <u>\$156</u>
Multiple Dependent					= _____

****Or number previously paid, if greater; For Reissues, see below.**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>
<u>Fee Code</u>	<u>Fee (\$)</u>	<u>Fee Code</u>	<u>Fee (\$)</u>	
103	18	203	9	Claims in excess of 20
102	78	202	39	Independent claims in excess of 3
104	260	204	130	Multiple dependent claim, if not paid
109	78	209	39	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$ 210.00

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>	<u>Fee Paid</u>
<u>Fee Code</u>	<u>Fee (\$)</u>	<u>Fee Code</u>	<u>Fee (\$)</u>		
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for response within first month	
116	380	216	190	Extension for response within second month	
117	870	217	435	Extension for response within third month	
118	1,360	218	680	Extension for response within fourth month	
128	1,850	228	925	Extension for response within fifth month	
119	300	219	150	Notice of Appeal	
120	300	220	150	Filing a brief in support of an appeal	
121	260	221	130	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive unavoidably abandoned application	
141	1,210	241	605	Petition to revive unintentionally abandoned application	
142	1,210	242	605	Utility issue fee (or reissue)	
143	430	243	215	Design issue fee	
144	580	244	290	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	\$40
146	760	246	380	For filing a submission after final rejection (see 37 CFR 1.129(a))	
149	760	249	380	For each additional invention to be examined (see 37 CFR 1.129(a))	
Other fee (specify) _____					
Other fee (specify) _____					

SUBTOTAL (3) \$ 40.00

*Reduced by Basic Filing Fee Paid

SUBMITTED BY:Typed or Printed Name: Tarek N. FahmiSignature Date September 1, 1999Reg. Number 41,402

Deposit Account User ID _____

(complete if applicable)

1c525 U.S. PTO
09/388804



EXPRESS MAIL CERTIFICATE OF MAILING

"Express Mail" mailing label number: EL371011509US

Date of Deposit: September 1, 1999

I hereby certify that I am causing this paper or fee to be deposited with the United States Postal Service "Express Mail Post Office to Addressee" service on the date indicated above and that this paper or fee has been addressed to the Assistant Commissioner for Patents, Washington, D. C. 20231

Patricia A. Balero

(Typed or printed name of person mailing paper or fee)

(Signature)
(Signature of person mailing paper or fee)

9/1/99

(Date signed)

Serial/Patent No.: **** Filing/Issue Date: Herewith
Client: CISCO TECHNOLOGY, INC.
Title: FAIR MULTIPLEXING SCHEME FOR MULTIPLE INPUT PORT ROUTER

BSTZ File No.: 81862.P157

Atty/Secty Initials: TNF/pab

Date Mailed: 9/1/99

Docket Due Date: _____

The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:

- | | |
|------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Amendment/Response (____ pgs.) | <input checked="" type="checkbox"/> Express Mail No.: <u>EL371011509US</u> <input checked="" type="checkbox"/> Check No. <u>30298</u> |
| <input type="checkbox"/> Appeal Brief (____ pgs.) (in triplicate) | <input type="checkbox"/> _____ Month(s) Extension of Time Amt: <u>\$970.00</u> |
| <input checked="" type="checkbox"/> Application - Utility (<u>17</u> pgs., with cover and abstract) | <input type="checkbox"/> Information Disclosure Statement & PTO 1449 (____ pgs.) <input checked="" type="checkbox"/> Check No. <u>30299</u> |
| <input type="checkbox"/> Application - Rule 1.53(b) Continuation (____ pgs.) | <input type="checkbox"/> Issue Fee Transmittal Amt: <u>\$40.00</u> |
| <input type="checkbox"/> Application - Rule 1.53(b) Divisional (____ pgs.) | <input type="checkbox"/> Notice of Appeal |
| <input type="checkbox"/> Application - Rule 1.53(b) CIP (____ pgs.) | <input type="checkbox"/> Petition for Extension of Time |
| <input type="checkbox"/> Application - Rule 1.53(d) CPA Transmittal (____ pgs.) | <input type="checkbox"/> Petition for _____ |
| <input type="checkbox"/> Application - Design (____ pgs.) | <input checked="" type="checkbox"/> Postcard |
| <input type="checkbox"/> Application - PCT (____ pgs.) | <input type="checkbox"/> Power of Attorney (____ pgs.) |
| <input type="checkbox"/> Application - Provisional (____ pgs.) | <input type="checkbox"/> Preliminary Amendment (____ pgs.) |
| <input checked="" type="checkbox"/> Assignment and Cover Sheet | <input type="checkbox"/> Reply Brief (____ pgs.) |
| <input checked="" type="checkbox"/> Certificate of Mailing (Express Mail) | <input type="checkbox"/> Response to Notice of Missing Parts |
| <input checked="" type="checkbox"/> Declaration & POA (<u>6</u> pgs.) | <input type="checkbox"/> Small Entity Declaration for Indep. Inventor/Small Business |
| <input type="checkbox"/> Disclosure Docs & Orig & Copy of Invention Signed Letter (____ pgs.) | <input checked="" type="checkbox"/> Transmittal Letter, in duplicate |
| <input checked="" type="checkbox"/> Drawings: <u>9</u> # of sheets includes <u>9</u> figures | <input checked="" type="checkbox"/> Fee Transmittal, in duplicate |

☐ Other: _____